COUNTY OF EL DORADO



DEPARTMENT OF TRANSPORTATION



APPLICATION FOR ROAD CLOSURE

THIS APPLICATION MUST BE SUBMITTED AT LEAST 90 DAYS PRIOR TO THE ROAD CLOSURE DATE

APPLICATION RECEIVED BY: DATE:
TITLE OF EVENT: Jeepers Jamborel & Jeep Jamborel, Inc.
TYPE OF EVENT: Guided Off-Road Trip.
sponsoring organization: Jeepers Jamborel & Jeep Jamboree Inc.
ESTIMATED NUMBER OF PARTICIPANTS: 1200 people - 500 vehicles
DATE OF ROAD CLOSURE: Wed July 25 - Tues July 31 & Thurs, August 2 - Mon Aug. 6,201;
START TIME: 6.00 AM COMPLETION TIME: 12:000M
ROADIS) TO BE CLOSED: Publicon Trail Pond from Wentwirth Springs & Coon Labe
SUBMITTED BY: Jeepers Jambolee DATE: 3/16/2012
CONTACT PERSON: LOCUY Stiles PHONE/FAX: 530-333-4771 333-0245
ADDRESS: P.O Box 900, 6275 Main Street George Lown, CA 94284
EMAIL: mail @ jeepers jamborel. com
To the fullest extent allowed by law the Organizer shall defend, Indemnify, and hold the County harmless against and from any and all claims, suits, losses, damages, and liability for damages of every name, kind and description, including attorney's fees and costs incurred, brought for, or on account of, injuries to or death of any person, including but not limited to workers, County employees, and the public, or damage to property, or in anyway arise out of are connected with the work by the Organizer, his agents or employees including contractor's services, operation or performance hereunder, regardless of the existence or degree of fault or negligence on the part of the County, the Organizer, contractor, subcontractor(s) and employee(s) or any of these, except for part of the sole, or active negligence of the County, its officers and employees, or as expressly prescribed by statute. This duty of the Organizer to Indemnify and save the County harmless includes the duties to defined set forth in California Civil Code Section 2778. SIGNATURE/TITLE: **AULTITUDE** DATE**
I HAVE READ, ACKNOWLEDGE AND AGREE TO THE ABOVE CONDITION WITH REGARD TO THIS ROAD CLOSURE.

Jeepers Jamboree & Jeep Jamboree, Inc.

P.O. Box 900 6275 Main Street Georgetown, CA 95634 Phone Number: 530-333-4771
Fax Number: 530-333-0245
Website: jeepersjamboree.com
E-mail: mail@jeepersjamboree.com

March 6, 2012

Sheri Woodford Dept. of Transportation 2850 Fairlane Ct Placerville, CA 95667

Re: Road closure for the 60th Annual Jeepers Jamboree and 34th Annual Jeep Jamboree.

Dear Sheri:

We are requesting a road closure (parade permit?) for our Jamborees. This year we request closure from Wentworth Springs and Loon Lake Dam over the Rubicon Trail only. The dates and time requested are as follows:

For Wentworth Springs, Loon Lake Dam, and Rubicon Trail areas;
 6:00 AM Wednesday, July 25, 2012 through Midnight Tuesday July 31, 2012
 And
 6:00 AM Thursday, August 2, 2012, through Midnight Monday August 5, 2012

For the Jeepers Jamboree trip we anticipate approximately 500 vehicles with 1200 participants. For the Jeep Jamboree trip we anticipate approximately 150 vehicles with 300 participants. As stated, these numbers are only approximations at this time based on the sign-ups to-date. Should they change substantially, we will notify you closer to the above dates.

We will have signs erected at the Loon Lake Dam and at Miller Lake. We will not need any barricades.

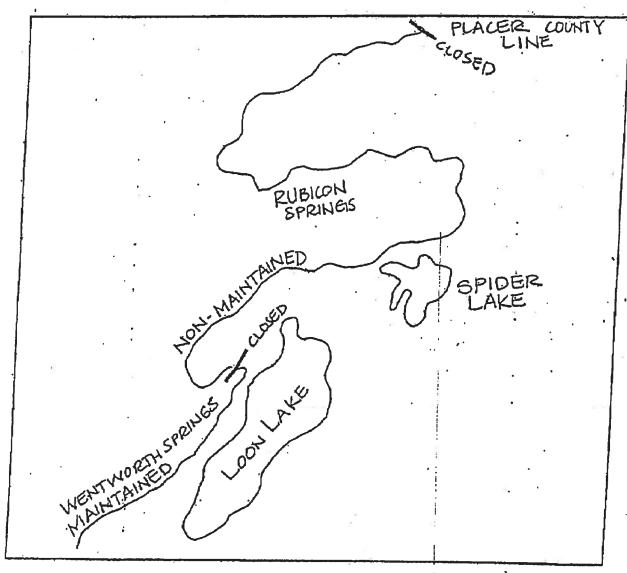
Our Insurance Company sent our Certificate of Insurance at the beginning of the year. If you did not received please let me know and I will have it re-sent.

Sincerely,

Dan DeWolf, President

Jeepers Jamboree & Jeep Jamboree, Inc.

SKETCH (To be completed if more than one County Road is to be closed)

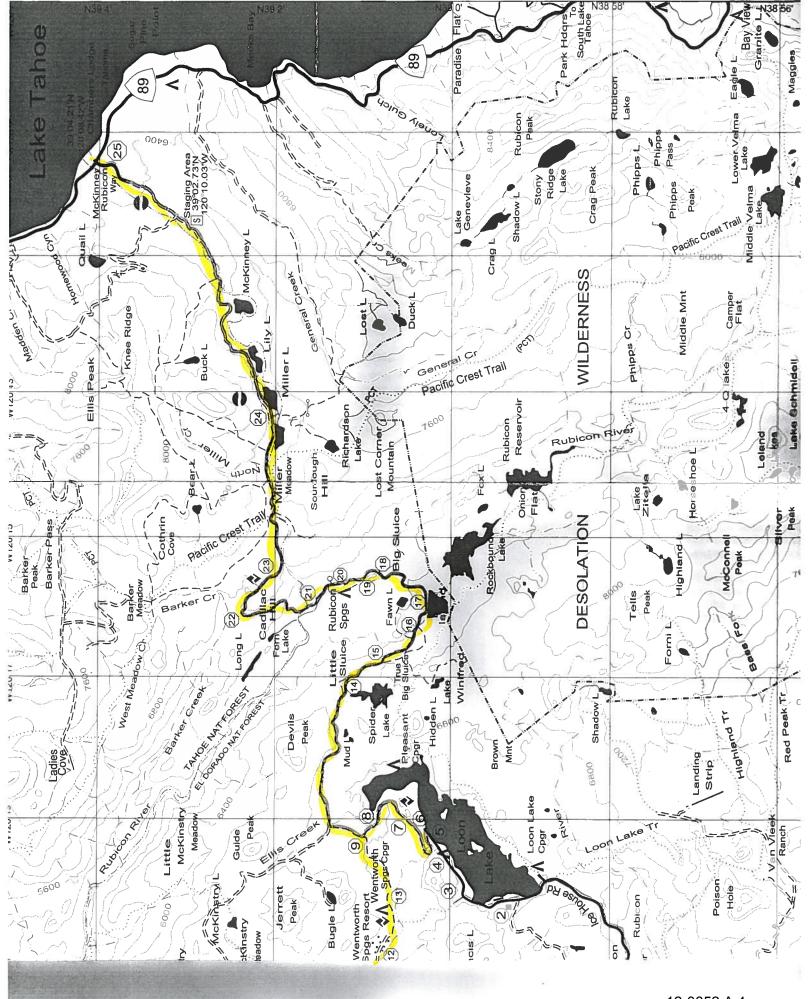


INSTRUCTIONS:

- 1. Sketch all roads to be closed and label roads by name.
- 2. Indicate all intersecting public roads along route.
- 3. Indicate "START" and "FINISH" locations of event.
- 4. Indicate direction of travel for the participants.

NOTE:

This sketch may serve as the "SIGNING/DETOUR PLAN" if it clearly identifies the type and location of all proposed signs, barricades, cones, and flaggers.



RENEWAL OF CPS1264354

COMMON POLICY DECLARATIONS 7

SCOTTSDALE INSURANCE COMPANY®

Home Office:

CPS1450707

One Nationwide Plaza

Columbus, Ohio 43215 Administrative Office:

8877 North Gainey Center Drive - Scottsdale, Arizona 85258 1-800-423-7675 A STOCK COMPANY

ITEM 1. Named Insured and Mailing Address JEEPERS JAMBOREE & JEEP JAMBOREE INC

P O BOX 900 GEORGETOWN

CA 95634

Agent Name and Address

BURNS & WILCOX, LTD. 200 BURNS & WILCOX CENTER 7575 N. PALM AVE.

FRESNO, CA 93711

Agent No.: ___04071

Program No.: _ CT/AT

Policy Number

ITEM 2. Policy Period

To: 12/01/2012

Term: 366 DAYS

From: 12/01/2011 12:01 A.M., Standard Time at the mailing address shown in ITEM 1.

Business Description: SPONSOR OF TWO JEEP JAMBOREES PER YEAR

In return for the payment of the premium, and subject to all the terms of this policy, we agree with you to provide the insurance as stated in this policy. This policy consists of the following coverage parts for which a premium is indicated. Where no premium is shown, there is no coverage. This premium may be subject to adjustment.

Outromo no Pontino		D	
Coverage Part(s)	2	Premiur	n Summary
Commercial General Liability Coverage Part		\$	4,031
Commercial Property Coverage Part		\$	COVERED
Commercial Crime And Fidelity Coverage Part		\$	COVERED
Commercial Inland Marine Coverage Part		\$	COVERED
Commercial Auto Coverage Part		\$	COVERED
Professional Liability Coverage Part		\$	COVERED
		\$	
		\$	
	Total Policy Premium:	\$	4,031.00
Carlo Carlo Basel B & Brown Free		\$	
RECEIVED		\$	
(ETT) = 1 com	SURPLUS LINES TAX	\$	120.93
FEB - 1 2012	STAMPING FEE	\$	10.08
SEABURY - COPLAND		\$	
& ANDERSON		\$	
	Policy Total:	\$	4,162.01
Form(s) and Endorsement(s) made a part of this policy at time of	fissue: Burns & Wile	OX BF	256.00
SEE SCHEDULE OF FORMS AND ENDORSEMENTS			1412 81

K.WHITE 1/24/2012

> THIS COMMON POLICY DECLARATION AND THE SUPPLEMENTAL DECLARATION(S), TOGETHER WITH THE COMMON POLICY CONDITIONS, COVERAGE PART(S), COVERAGE FORM(S) AND FORMS AND ENDORSEMENTS, IF ANY, COMPLETE THE ABOVE NUMBERED POLICY.



COMMERCIAL GENERAL LIABILITY COVERAGE PART SUPPLEMENTAL DECLARATIONS

Policy No. CPS1450707	Effective Date					
		12:01 A.M., Standard Time				
Named Insured <u>JEEPERS JAMBOREE & JEEP JAMBORE</u>	E INAgent No	04071				
Item 1. Limits of Insurance		· · · · · · · · · · · · · · · · · · ·				
Coverage		Limit of Liability				
Aggregate Limits of Liability		Products/ Completed				
=	\$ 2,000,000	Operations Aggregate				
		General Aggregate (other than				
Coverage A. Dadilla Islanda	\$_2,000,000	Products/ Completed Operations)				
Coverage A - Bodily Injury and		any one occurrence subject				
Property Damage Liability		to the Products/ Completed				
	\$ 1,000,000	Operations and General				
ı'	\$1,000,000	Aggregate Limits of Liability				
		any one premises subject to the				
		Coverage A occurrence and				
		the General Aggregate Limits				
Damage to Premises Rented to You Limit	\$100,000	_ of Liability				
Coverage B - Personal and		any one person or organization				
Advertising Injury Liability		subject to the General Aggregate				
	\$1,000,000	Limits of Liability				
Coverage C - Medical Payments		any one person subject to the				
		Coverage A occurrence and				
	\$ 5,000	the General Aggregate Limits				
Item 2. Description of Business		II .				
Form of Business:						
🔲 Individual 🔲 Partnership 🔲 Joint Vent	ture 🔲 Trust	☐ Limited Liability Company				
Organization including a corporation (other than Pa	rtnership, Joint Venture or	Limited Liability Company)				
Location of All Premises You Own, Rent or Occupy:						
See Schedule of Locations						
		99				
Item 3. Forms and Endorsements						
Form(s) and Endorsement(s) made a part of this policy at tir	me of issue:					
See Schedule of Forms and Endorsements						
Item 4. Premiums						
Coverage Part Premium:		\$ 3831.00				
Other Premium: ADDITIONAL INSURED FULL	LY EARNED	\$ 200				
Total Premium:		\$ 4,031				
THESE DECLARATIONS ARE PART OF THE POLICY DECLARATIONS CONTAINING THE NAME OF THE INSURED AND						

CLS-SD-1L (8-01)

THE POLICY PERIOD.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

CG 20 11 01 96

ADDITIONAL INSURED - MANAGERS OR LESSORS OF PREMISES

This endorsement modifies insurance provided under the following: COMMERCIAL GENERAL LIABILITY COVERAGE PART

This endorsement changes the policy effective on the inception date of the policy unless another date is indicated below.

Endorsement effective	Policy No.
05/11/2012	standard time
Named Insured	Countersigned by
JEEPERS JAMBOREE & JEEP JAMBOR	REE INC

(Authorized Representative)

SCHEDULE

1. Designation of Premises (Part Leased to You):

JULY 25 - JULY 31, 2012 / AUGUST 02 - AUGUST 06, 2012
TRIP DATES

2. Name of Person or Organization (Additional Insured):

THE COUNTY OF EL DORADO, ITS OFFICERS, OFFICIALS, EMPLOYEES AND VOLUNTEERS 2850 FAIRLANE COURT / ATTN: SHERI WOODFORD PLACERVILLE CA 95667

3. Additional Premium: 50.00

(If no entry appears above, the information required to complete this endorsement will be shown in the Declarations as applicable to this endorsement.)

WHO IS AN INSURED (Section II) is amended to include as an insured the person or organization shown in the Schedule but only with respect to liability arising out of the ownership, maintenance or use of that part of the premises leased to you and shown in the Schedule and subject to the following additional exclusions:

This insurance does not apply to:

- 1. Any "occurrence" which takes place after you cease to be a tenant in that premises.
- 2. Structural alterations, new construction or demolition operations performed by or on behalf of the person or organization shown in the Schedule.

CG 20 11 01 96

GENERAL CHANGE ENDORSEMENT

This endorsement changes the policy effective on the inception date of the policy unless another date is indicated below:

Name of Insurance Company(ies) Scottsdale Insurance Company	Scottsdale	Ins	Company	100.0%	GenLiab
e e					
			**	Inception Date 12/1/2011	Expiration Date 12/1/2012
Endorsement Effective 5/11/2012				Policy Number CPS1450707	Endorsement #
Named Insured Jeepers Jamboree & Jeep Jamboree Inc				Karen White Countersigned By	

(Authorized Representative)

IN CONSIDERATION OF THE <u>PREMIUM PREVIOUSLY CHARGED</u>, IT IS HEREBY UNDERSTOOD AND AGREED THAT THE POLICY IS AMENDED AS FOLLOWS:

THE NAME OF THE ADDITIONAL INSURED, <u>COUNTY OF EL DORADO</u> AND THE <u>EVENT DATES</u> ARE <u>AMENDED</u> TO READ AS PER THE <u>REVISED</u> ENDT FORM CG2011, ADDITIONAL INSURED-MANAGERS OR LESSORS OF PREMISES ATTACHED:

THE COUNTY OF EL DORADO, ITS OFFICERS, OFFICIALS, EMPLOYEES AND VOLUNTEERS

ATTN: SHERI WOODFORD 2850 FAIRLANE COURT PLACERVILLE CA 95667

DATES: JULY 25 - 31, 2012 / AUGUST 02 - 06, 2012

All other terms and conditions remain unchanged.

mysuglian 5/16/2012